

Minutes of the meeting of the Board of Directors of the Cook County Health and Hospitals System held Friday, February 28, 2014 at the hour of 8:00 A.M. at 1900 West Polk Street, in the Second Floor Conference Room, Chicago, Illinois.

I. Attendance/Call to Order

Chairman Carvalho called the meeting to order.

Present: Chairman David Carvalho and Directors Hon. Jerry Butler; Lewis M. Collens; Ada Mary Gugenheim; M. Hill Hammock; Wayne M. Lerner, DPH, FACHE; Luis Muñoz, MD, MPH; Carmen Velasquez; and Dorene P. Wiese, EdD (9)

Present

Telephonically: Vice Chairman Jorge Ramirez (1)

Absent: Director Reverend Calvin S. Morris, PhD (1)

Chairman Carvalho stated that Vice Chairman Ramirez was unable to be physically present, but was able to participate in the meeting telephonically.

Director Lerner, seconded by Director Hammock, moved to allow Vice Chairman Ramirez to participate as a voting member for this meeting telephonically. THE MOTION CARRIED UNANIMOUSLY.

Vice Chairman Ramirez confirmed his presence telephonically.

Additional attendees and/or presenters were:

Gina Besenhofer – System Director of Supply Chain Management
John Cooke - Cook County Office of Capital Planning and Policy
John Cookinham – System Chief Financial Officer
Kimbal Goluska – President, Chicago Consultants Studio, Inc.
Randolph Johnston – System Associate General Counsel

Natasha Lafayette-Jones - Director of Health Information Management
Anthony Rajkumar – System Chief Business Officer
Ram Raju, MD, MBA, FACS, FACHE – Chief Executive Officer
Deborah Santana – Secretary to the Board
John Jay Shannon, MD – Chief of Clinical Integration

II. Public Speakers

Chairman Carvalho asked the Secretary to call upon the registered public speakers.

The Secretary called upon the following registered public speaker:

1. George Blakemore Concerned Citizen

III. Board and Committee Reports

A. Minutes of the Board of Directors Meeting, January 24, 2014

Director Butler, seconded by Director Muñoz, moved the approval of the Minutes of the Board of Directors Meeting of January 24, 2014. THE MOTION CARRIED UNANIMOUSLY.

III. Board and Committee Reports (continued)

B. Minutes of the Quality and Patient Safety Committee Meeting, January 28, 2014

- Medical Staff Appointments/Reappointments/Changes

Director Collens, seconded by Director Velasquez, moved the approval of the Minutes of the Quality and Patient Safety Committee Meeting of January 28, 2014. THE MOTION CARRIED UNANIMOUSLY.

C. Minutes of the Human Resources Committee Meeting, February 21, 2014

- Proposed Collective Bargaining Agreement: Local 399 Operating Engineers - Prevailing Wage Rates

Director Wiese, seconded by Director Butler, moved the approval of the Minutes of the Human Resources Committee Meeting of February 21, 2014. THE MOTION CARRIED UNANIMOUSLY.

D. Minutes of the Finance Committee Meeting, February 21, 2014

- Contracts and Procurement Items (detail was provided as attachment to Board Agenda)

Director Butler, seconded by Director Wiese, moved the approval of the Minutes of the Finance Committee Meeting of February 21, 2014. THE MOTION CARRIED.

Chairman Carvalho abstained and voted PRESENT on request number 1, under the Contracts and Procurement Items contained within the Minutes.

John Cookinham, System Chief Financial Officer, provided a brief update regarding financial statements. He noted that they have not been finalized and presented at the last couple of Finance Committee Meetings; there are several factors involved.

Because the System's financial statements are accrual-based, Mr. Cookinham's concern has been that, in the past, financial statements have been issued, and when the audited statements are published, there are huge swings because the auditors are forced to make adjustments to report that accrual activity. As an example, in 2014, the System will collect approximately \$70 million of per-member per-month (PMPM) revenue that was earned in 2013 but not received until 2014. \$33 million was received in December; \$25 million was received in January; and another \$32.5 million was received in February. The dilemma is that he knows that one hundred percent of what was received in December was 2013 money; January is probably 2013 money, but there will need to be some sort of examination of the February money, because it could be PMPM money earned for the December and January periods. The next factor relates to domestic claims, which are the expenses relating to care provided to the CountyCare patients. Those expenses are in the financial statements, because whether the patient was identified as a CountyCare patient at the end of November or not, they were cared for in a County facility. Other expenses that will have to be accrued are the foreign expenses – those expenses are related to care provided to CountyCare patients by providers in the System's network; he noted that, as recently as yesterday, staff is getting the information to finalize those accruals. He added that there will be oversight from an outside firm to look at the adequacy of the System's estimates.

III. Board and Committee Reports (continued)

D. Minutes of the Finance Committee Meeting, February 21, 2014

In response to Director Collens' question regarding what resources may be needed to have a system that will generate the information on a timely basis, Mr. Cookinham responded that the System has been receiving reports from the third party administrator and has input the information into a database at the System. That activity was at the time new to the System, and he does not anticipate having issues in the future with delays in that regard. Dr. Ram Raju, Chief Executive Officer, stated that delays in the State's ability to process and approve applications were also a factor. He noted that, if the State approves an application four months after it is submitted, and the patient had services provided during those months, then those providers will go back and bill the System for that period; he added that the provider has up to one year to submit a claim.

Director Lerner inquired whether there was a plan to create two financial statements – one for the provider organization and one for the managed care organization. Mr. Cookinham responded that the answer was both yes and no. He originally planned that there would be a monthly report for CountyCare; the System has not received sufficient information to be able to do that yet. In addition, anything that CountyCare does under the System's current organization has to be incorporated in the System's financial statements. Following further discussion, Director Lerner suggested that this is the kind of thing that should be unraveled by the Finance Committee, to address the following questions: 1) what are the things holding the System back to be able to monitor this as a managed care operation and as a provider, that then collapse into one set of financials; and 2) what are the things that will propel the System to be able to monitor this on a regular basis¹.

Chairman Carvalho stated that the Finance Committee should receive a refresher session on where the System is in terms of systems it has and does not have, and regarding the impediments to getting the systems needed to fully understand and develop financials that are usable in the way that most Directors who have experience in the private sector have experience with². It would be beneficial for the Finance Committee to review this information, so that everyone can be brought up to date on where the System is going and its efforts; for example, the System had plans and a vendor selected to get an enterprise resource planning (ERP) system, but those plans were put on hold, because the County's administration also decided to get an ERP system and asked the System's administration to wait until the County finished their selection process; that process was expected to take a couple of years.

E. Minutes of the Quality and Patient Safety Committee Meeting, February 25, 2014

- Medical Staff Appointments/Reappointments/Changes

During the presentation of the Minutes, Director Collens indicated that, in the section of the Minutes relating to the regulatory update, the Minutes should reflect that the hospital was found to have no condition-level deficiencies.

Director Collens, seconded by Director Lerner, moved the approval of the Minutes of the Quality and Patient Safety Committee Meeting of February 25, 2014, as amended. THE MOTION CARRIED UNANIMOUSLY.

IV. Action Items

A. Proposed reappointments of Hon. John P. Daley and Dr. Robert A. Weinstein to the CORE Foundation, submitted by Cook County Board President Toni Preckwinkle for approval by the CCHHS Board of Directors (Attachment #1)

Director Hammock, seconded by Director Muñoz, moved the approval of the proposed reappointments of Hon. John P. Daley and Dr. Robert A. Weinstein to the CORE Foundation. THE MOTION CARRIED UNANIMOUSLY.

B. Request for ~~authority to execute~~ concurrence with the execution of a contract with The Chicago Consultants Studio, Inc., Chicago, Illinois (CCS), for program and development management services for the John H. Stroger, Jr. Hospital Campus (Attachment #2)

Chairman Carvalho noted that this request should be amended to reflect that this is a request for concurrence with the execution of the contract. This is a contract of the County Board; from time to time, contracts like this are shared with the System Board for its concurrence.

Anthony Rajkumar, System Chief Business Officer, and John Cooke, Director of the Cook County Office of Capital Planning and Policy, presented the item for the Board's consideration, and provided an overview of the matter. Kimbal Goluska, President of Chicago Consultants Studio, Inc., provided additional information. The Board reviewed and discussed the matter.

Director Lerner, seconded by Director Muñoz, moved to concur with the execution of the contract with Chicago Consultants Studio, Inc. THE MOTION CARRIED UNANIMOUSLY.

C. Contracts and Procurement Items (Attachment #3)

Gina Besenhofer, System Director of Supply Chain Management, provided an overview of the request presented for the Board's consideration. The Board reviewed and discussed the matter.

Natasha Lafayette-Jones, Director of Health Information Management, provided additional information regarding the request. She stated that this request is for training and education services relating to the implementation of the International Classification of Diseases and Related Health Problems, 10th Revision (IDC-10); ICD-10 is a code set used to report medical diagnoses and inpatient procedures. The transition from IDC-9 to ICD-10 has been delayed in the past; however, it has been communicated that the October 1, 2014 transition date is not expected to be delayed.

Director Velasquez recommended that periodic reports should be given on the implementation³. Chairman Carvalho inquired as to the status of the capacity of System coders. Mr. Cookinham responded that the System has acquired software to try to increase their productivity. The initial estimates of the loss of productivity for coders due to the transition to ICD-10 is in the range of fifty percent; because of the complexity of ICD-10, there is software available that helps them in their job, and that was to restore a portion of that productivity loss.

IV. Action Items

C. Contracts and Procurement Items (continued)

Ms. Lafayette-Jones stated that the administration is working on a number of initiatives relating to the coding aspect of ICD-10. Training has been put in place and has been ongoing for the last year to train up the current staff; that training includes in-person and web-based training. Additionally, the administration is currently reviewing the matter of staffing to ensure that the current staffing is augmented by contracted services that can provide the same level of coding accuracy that is required.

Director Butler, seconded by Director Velasquez, moved the approval of request number 1.
THE MOTION CARRIED UNANIMOUSLY.

D. Any items listed under Sections III, IV and VII

E. Proposed appointment of Dr. John Jay Shannon to the CORE Foundation, submitted by Cook County Board President Toni Preckwinkle for approval by the CCHHS Board of Directors (Attachment #4)

Director Hammock, seconded by Director Muñoz, moved the approval of the proposed appointment of Dr. John Jay Shannon to the CORE Foundation. THE MOTION CARRIED UNANIMOUSLY.

V. Report from Chairman of the Board

A. Board Education – Charity Care Update (Attachment #5)

Mr. Cookinham reviewed the information provided regarding charity care. The Board reviewed and discussed the information.

Referring to information contained in Mr. Cookinham's presentation, Director Velasquez suggested that, instead of using the term "free" care, "uncompensated" care should be used.

Chairman Carvalho suggested that, at a future Finance Committee Meeting, a discussion should be held regarding what should be done with regard to those people who are eligible for CountyCare but refuse to enroll in it – does the System provide the deep discounts that the person would receive under the CareLink Policy⁴? Right now the policy is to extend the discount under CareLink to persons who are eligible for CountyCare but who refuse to enroll in it or in Medicaid.

VI. Report from Chief Executive Officer (Attachment #6)

A. The Path to Transformation: State of Illinois 1115 Waiver Proposal

Dr. Raju provided an update on the following subjects: CountyCare Section 1115 Medicaid Waiver Demonstration Project/Managed Care; Clinical Update; Patient Portal; Leadership Development Program; and Recognition of Employees. The Board reviewed and discussed the information.

VI. Report from Chief Executive Officer (continued)

Additionally, Dr. Raju provided a brief overview of the Path to Transformation: State of Illinois 1115 Waiver Proposal. Chairman Carvalho noted that additional information on the subject can be found on the State's website.

VII. Closed Session Items

A. Claims and Litigation

B. Discussion of personnel matters

C. Recruitment of Permanent Chief Executive Officer for the Cook County Health and Hospitals System

Director Lerner, seconded by Director Butler, moved to recess the regular session and convene into closed session, pursuant to the following exceptions to the Illinois Open Meetings Act: 5 ILCS 120/2(c)(1), regarding "the appointment, employment, compensation, discipline, performance, or dismissal of specific employees of the public body or legal counsel for the public body, including hearing testimony on a complaint lodged against an employee of the public body or against legal counsel for the public body to determine its validity," 5 ILCS 120/2(c)(11), regarding "litigation, when an action against, affecting or on behalf of the particular body has been filed and is pending before a court or administrative tribunal, or when the public body finds that an action is probable or imminent, in which case the basis for the finding shall be recorded and entered into the minutes of the closed meeting," 5 ILCS 120/2(c)(12), regarding "the establishment of reserves or settlement of claims as provided in the Local Governmental and Governmental Employees Tort Immunity Act, if otherwise the disposition of a claim or potential claim might be prejudiced, or the review or discussion of claims, loss or risk management information, records, data, advice or communications from or with respect to any insurer of the public body or any intergovernmental risk management association or self insurance pool of which the public body is a member," and 5 ILCS 120/2(c)(17), regarding "the recruitment, credentialing, discipline or formal peer review of physicians or other health care professionals for a hospital, or other institution providing medical care, that is operated by the public body."

On the motion to recess the regular session and convene into closed session, a roll call was taken, the votes of yeas and nays being as follows:

Yeas: Chairman Carvalho, Vice Chairman Ramirez and Directors Butler, Collens, Gugenheim, Hammock, Lerner, Muñoz, Velasquez and Wiese (10)

Nays: None (0)

Absent: Director Morris (1)

THE MOTION CARRIED UNANIMOUSLY.

Chairman Carvalho declared that the closed session was adjourned. The Board reconvened into regular session.

VIII. Adjourn

Director Collens, seconded by Director Wiese, moved to adjourn the meeting. THE MOTION CARRIED UNANIMOUSLY AND THE MEETING ADJOURNED.

Respectfully submitted,
Board of Directors of the
Cook County Health and Hospitals System

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
David Carvalho, Chairman

Attest:

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Deborah Santana, Secretary

-
- ¹ Follow-up: request for Finance Committee to address the following questions: 1) what are the things holding the System back to be able to monitor this as a managed care operation and as a provider, that then collapse into one set of financials; and 2) what are the things that will propel the System to be able to monitor this on a regular basis. Page 3.
- ² Follow-up: recommendation for Finance Committee to receive a refresher session on where the System is in terms of systems it has and does not have, and regarding the impediments to getting the systems needed. Page 3.
- ³ Follow-up: recommendation that periodic reports be given on the implementation of ICD-10. Page 4.
- ⁴ Follow-up: for future Finance Committee Meeting, request that a discussion be held regarding what should be done with regard to those people who are eligible for CountyCare but refuse to enroll in it. Page 5.

Cook County Health and Hospitals System
Board of Directors Meeting Minutes
February 28, 2014

ATTACHMENT #1



OFFICE OF THE PRESIDENT
BOARD OF COMMISSIONERS OF COOK COUNTY
118 NORTH CLARK STREET
CHICAGO, ILLINOIS 60602
(312) 603-6400
TDD (312) 603-5255

TONI PRECKWINKLE
PRESIDENT

January 31, 2014

Chairman and Members of the
Cook County Health & Hospitals System Board of Directors
1900 West Polk Street, Suite 220
Chicago, Illinois 60612

Ladies and Gentlemen:

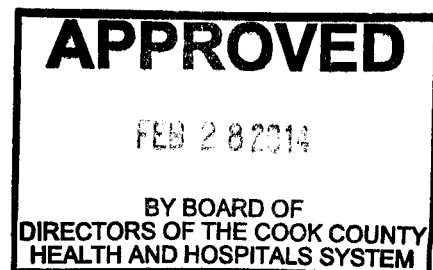
Please be advised that I hereby reappoint the Honorable John P. Daley to the CORE Foundation for a three (3) year term to begin immediately and expire December 31, 2016.

I submit this communication for your approval.

Sincerely,

A handwritten signature in black ink, reading "Toni Preckwinkle". The signature is written in a cursive, flowing style.

Toni Preckwinkle
President





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BOARD OF COMMISSIONERS OF COOK COUNTY
118 NORTH CLARK STREET
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January 31, 2014

Chairman and Members of the
Cook County Health & Hospitals System Board of Directors
1900 West Polk Street, Suite 220
Chicago, Illinois 60612

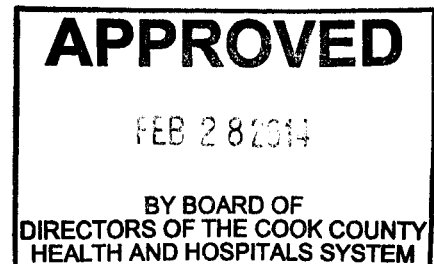
Ladies and Gentlemen:

Please be advised that I hereby reappoint Robert A. Weinstein, M.D. to the CORE Foundation for a three (3) year term to begin immediately and expire December 31, 2016.

I submit this communication for your approval.

Sincerely,


Toni Preckwinkle
President



Cook County Health and Hospitals System
Board of Directors Meeting Minutes
February 28, 2014

ATTACHMENT #2

Item IV(B)

February 28, 2014 CCHHS Board of Directors Agenda

Requesting authority to execute a contract with The Chicago Consultants Studio, Inc., Chicago, Illinois (CCS), for program and development management services. CCS is being procured via reference contract for the Illinois Medical District (IMD) Urban and Land Use Planning and Consulting Services Agreement.

Reason: This contract provides for a strategic program manager for the John H. Stroger Hospital Campus. These services will provide the professional services needed to assess the Stroger Campus, prepare an overall strategic development framework to successfully guide the process, undertake the conceptual programmatic analysis of both core needs and excess real estate opportunities. This will translate into a master development program for two master developer RFP offerings. The consultant will manage those RFP processes through County selection and engagement of developers.

This is a joint project undertaken by the Office of Capital Planning and Policy and the Cook County Hospital. This is categorized as a programming for a redevelopment project.

Contract Term: 14 month base with one three month extension, commencing on the date of Cook County Board approval.

Estimated Fiscal Impact: CCHHS none
OCP \$2,408,000

Stroger Campus Development

COOK COUNTY

STROGER CAMPUS



STRATEGIC PROGRAM & DEVELOPMENT MANAGEMENT *PROCESS SUMMARY*



February 2014

Office of Capital Planning and Policy
Bureau of Economic Development

STRATEGIC DEVELOPMENT PROCESS



OBJECTIVES

- ***Solve for CCHHS' core needs at Stroger Campus AND identify potentials for redevelopment of available real estate***
- ***Translate into master development programs that envision a broader, vibrant mixed-use campus for Cook County and the community***
- ***Issue RFPs to the marketplace for master developers***
- ***Conclude with project implementation - two master developers to enhance the campus by leveraging inherent value and creating revenue for the County***

STRATEGIC DEVELOPMENT PROCESS

STROGER CAMPUS – ENHANCEMENTS AND VALUE CREATION



STRATEGIC DEVELOPMENT PROCESS



WITHIN THE FIRST 90 DAYS:

STRATEGIC CAMPUS DEVELOPMENT PLAN

BY MID-SUMMER:

**CCHHS CORE NEEDS MASTER DEVELOPMENT
PROGRAM**

**CAMPUS COMMERCIAL ENHANCEMENTS MASTER
DEVELOPMENT PROGRAM**

**COLLABORATIVE PUBLIC ENVIRONS IMPROVEMENTS
RECOMMENDATIONS**

BY LATE-SUMMER:

LAUNCH RFQ/PS FOR MASTER DEVELOPERS

PROJECTS UNDERWAY BY SPRING 2015

STRATEGIC DEVELOPMENT PROCESS



PROCESS / MILESTONE HIGHLIGHTS

- Utilizes and builds upon all prior work with focus now on definition, implementation and execution of real developments
- *Strategic Campus Development Plan* within first 90 days
 - Establishes critical “road map” for development and solicitations
 - Addresses core needs: admin office, clinic, parking; campus ingress/egress
 - Addresses revenue and value potentials: old CC, vacant land, Pasteur Park retail infill, hotel, housing, dorms, office, special uses, etc.)
- Unique charrette process in early summer engages international attention and expertise on old Cook County structure and builds positive developer/investor awareness and interest
- Issuance of Master Developer RFPs by late summer
- Engage stakeholders, CCHHS leadership, and County leadership intensively throughout the process

STRATEGIC DEVELOPMENT PROCESS



PROJECT LEADERSHIP

The **Chicago Consultants Studio**, will serve as the lead Strategic Program and Development Manager bringing successful experience in similar urban redevelopment efforts creating value and aggressively realizing new projects:

- The recently opened redevelopment of Harper Court in Hyde Park ultimately totaling \$250M and 1.1M sf of retail, commercial hotel and neighborhood amenities
- The South Hall expansion and West Hall expansion of McCormick Place
- The strategic development advisor for the IMDC on the restructured Gateway Site RFP
- Worldwide redevelopment experience both large and small scale ranging from London's 12.5M sf Canary Wharf to Puerto Rico's Roosevelt Roads Naval Base to CHA's Lake Park Crescent
- Recognized in both the private and public sectors as one of Chicago's most talented and creative strategic urban development professionals

STRATEGIC DEVELOPMENT PROCESS



A DIVERSE AND TALENTED TEAM

- **>35% MBE/WBE** utilization across all disciplines
- **100% of the sub consultant team comprised of minority owned and/or women owned businesses**
 - **Neal and Leroy** (MBE): Development Zoning, Entitlement and Strategic Legal Consultation
 - **Applied Real Estate Analysis, Inc** (MBE/WBE): Market Analysis and Economic Feasibility
 - **Brook Architecture** (MBE/WBE) and **Nia Architects** (MBE): Programming and Technical Feasibility
 - **Cotter Consulting** (WBE): Medical Programming and Capital Costing
 - **Prism Engineering** (MBE): Traffic, Circulation and Parking Analysis
 - **Target Group**: Community Engagement, Outreach & Economic Benefit
 - **Tristan & Cervantes** (MBE): Project Advocacy (Lobbyist)

Cook County Health and Hospitals System
Board of Directors Meeting Minutes
February 28, 2014

ATTACHMENT #3

COOK COUNTY HEALTH AND HOSPITALS SYSTEM
ITEM IV(C)
FEBRUARY 28, 2014 BOARD OF DIRECTORS MEETING
CONTRACTS AND PROCUREMENT ITEMS

Request #	Vendor	Service or Product	Fiscal impact not to exceed:	Affiliate / System	Begins on Page #
Extend and Increase Contract					
1	The Olenik Consulting Group, LLC	Service - ICD-10 training and education	\$641,250.00	System	2

Cook County Health & Hospitals System

BOARD APPROVAL REQUEST

SPONSOR: Natasha Lafayette-Jones, System Director Health Information Management		EXECUTIVE SPONSOR: John Cookinham, System Chief Financial Officer <i>John Cookinham</i>	
DATE: 02/05/2014		PRODUCT / SERVICE: Service - ICD-10 Training and Education	
TYPE OF REQUEST: Extend and Increase Contract		VENDOR / SUPPLIER: The Olenik Consulting Group, LLC, Chicago, IL	
ACCOUNT: 890-260	FISCAL IMPACT NOT TO EXCEED: \$641,250.00	GRANT FUNDED / RENEWAL AMOUNT: N/A	
CONTRACT PERIOD: 03/01/2014 thru 11/30/2014		CONTRACT NUMBER: H13-25-016	
COMPETITIVE SELECTION METHODOLOGY:			
<input checked="" type="checkbox"/> NON-COMPETITIVE SELECTION METHODOLOGY: Sole Source			

PRIOR CONTRACT HISTORY:

Contract number H13-25-016 was approved by the Cook County Health and Hospitals Systems Board on 02/28/2013 in the amount of \$357,180.00 for a period from 03/01/2013 thru 02/28/2014. The contract allowed The Olenik Consulting Group, LLC to provide consulting and project assistance in preparation for the transition to ICD-10 coding.

NEW PROPOSAL JUSTIFICATION:

Effective in 2014 the Centers for Medicare and Medicaid Services (CMS) will require all providers to be using ICD-10. The Olenik Group will provide project management, physician education, documentation review and coder anatomy/physiology and MDC training.

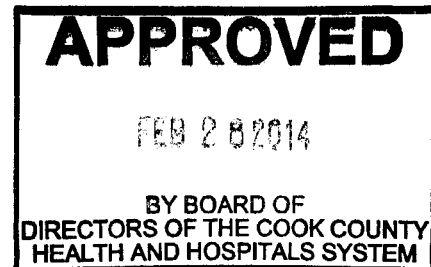
TERMS OF REQUEST:

This request is to extend and increase contract number H13-25-016 in an amount not to exceed \$641,250.00, as needed, for the period from 03/01/2014 thru 11/30/2014.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE:

CCHHS CBO: *Anthony Rajkumar*
Anthony Rajkumar, Chief Business Officer

CCHHS CEO: *Ram Raju*
Ram Raju, M.D., Chief Executive Officer



Request #

1

• Ambulatory & Community Health Network • Cermak Health Services • Department of Public Health •
• John H. Stroger, Jr. Hospital of Cook County • Oak Forest Health Center • Provident Hospital • Ruth M. Rothstein CORE Center •

We Bring Health CARE to Your Community

Revised 03/01/2011

Cook County Health and Hospitals System
Board of Directors Meeting Minutes
February 28, 2014

ATTACHMENT #4



**OFFICE OF THE PRESIDENT
BOARD OF COMMISSIONERS OF COOK COUNTY
118 NORTH CLARK STREET
CHICAGO, ILLINOIS 60602
(312) 603-6400
TDD (312) 603-5255**

**TONI PRECKWINKLE
PRESIDENT**

February 25, 2014

Chairman and Members of the
Cook County Health & Hospitals System Board of Directors
1900 West Polk Street, Suite 220
Chicago, Illinois 60612

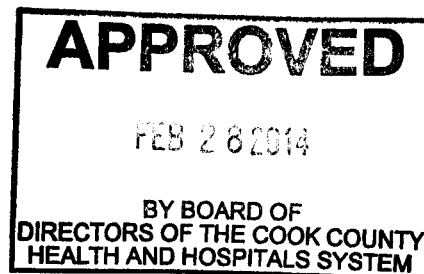
Ladies and Gentlemen:

Please be advised that I hereby appoint John Jay Shannon, M.D. to the CORE Foundation for a three (3) year term to begin immediately and to expire on December 31, 2016.

I submit this communication for your approval.

Sincerely,

Toni Preckwinkle
President
Cook County Board of Commissioners



Cook County Health and Hospitals System
Board of Directors Meeting Minutes
February 28, 2014

ATTACHMENT #5

Financial Counseling In 2014 at CCHHS

Financial Counseling 2014

- As of January 1st all Illinois hospitals were required to perform a financial screening prior to billing uninsured patients.
- CCHHS had in the past approached financial screening and counseling on a retro-active basis. Self pay patients were billed and encouraged to apply for Medicaid or CareLink if they were unable to pay for their services.
- CCHHS now performs screening at the point of registration.

Financial Counseling 2014

- Cerner has been modified to produce a screening document from registration information. This form will meet State requirements. Demographic information will populate the form at registration.
- Patients will be asked to indicate whether they believe they are eligible for uncompensated care because they meet State mandated criteria.

Financial Counseling 2014

- Patients will be asked to sign the new form and the form will be scanned into the system. The patient will also be provided a copy of the form. If patients at the point of registration can supply proof of their eligibility for uncompensated care the system information will be adjusted and a discount provided.
- If patients believe they are eligible for uncompensated care, but do not have their documentation at registration they will sign the form. The signed form will be scanned into the system and the patient can return the required information by mail, e-mail, or fax to obtain the discount.

Financial Counseling 2014

- Patients have 90 days to qualify for a discount on their CCHHS service. They are encouraged to make an appointment with the financial counselors to see what assistance is available to them.
- The Cerner system has been updated to produce work lists of the uninsured patients. The work lists will be used by CCHHS financial counselors to reach out to the patients to encourage them to apply for HUPDA, Medicaid, CountyCare, or CareLink.

Financial Counseling 2014

- If patients do not apply for financial assistance at the end of 90 days they will receive a bill from CCHHS.
- After patients receive a bill they are still able to seek financial assistance and apply for HUPDA, Medicaid, CountyCare, or CareLink.
- The self pay bills will direct patients to seek help from the financial counselors by calling the phone number on the bill.

Financial Counseling 2014

- Patients that do not seek financial counseling may receive up to three self pay statements. If the patients fail to seek assistance their account may be placed with a collection agency.
- The CCHHS financial assistance program has been adjusted to cover self pay amounts for Cook County residents. In the past the program only addressed uninsured patients. It will now assist under-insured patients too.

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February 28, 2014

ATTACHMENT #6



RAM RAJU, MD, MBA, FACHE, FACS
CHIEF EXECUTIVE OFFICER
COOK COUNTY HEALTH AND HOSPITALS SYSTEM
REPORT TO THE BOARD OF DIRECTORS
February 28, 2014

COUNTYCARE

SECTION 1115 MEDICAID WAIVER DEMONSTRATION PROJECT/MANAGED CARE

CountyCare continues to operate under a temporary extension of its 1115 Waiver achieving significant accomplishments in enrollment and membership once again this month. As previously reported, the Federal Centers for Medicaid and Medicare Services (CMS) granted the State of Illinois a 90-day temporary extension of the CountyCare waiver.

As of this week over 141,000 CountyCare applications have been started, of which more than 113,000 have been submitted to the State of Illinois Department of Human Services (DHS) for processing with more than 81,000 approved CountyCare members.

Achieving this level of market penetration in only one year is a phenomenal accomplishment, and one that could not have been achieved without the support and hard work of this Board, President Preckwinkle, the County Board Commissioners, CCHHS staff and our extensive network of vendors and app assistants. This success demonstrates that The Affordable Care Act is working and making a difference for a significant number of people and their families in Cook County today, and for years to come.

CLINICAL UPDATE

Leadership Rounds for Patient Safety

Safety is a critical and ongoing component of providing quality care to our patients. Several months ago, a Culture of Safety survey was conducted to better understand and improve safety practices. As an outgrowth of that survey the *Leadership Rounding for Patient Safety Program* has been established. The program is designed to develop a collaborative culture of safety for patients and associates. The goals of the program are to promote open and honest communication, understand barriers to patient safety and encourage reporting of safety events to drive system-wide improvement.

CCHHS Senior Leadership has begun conducting *Leadership Rounds for Patient Safety* throughout the entire system. Many healthcare systems conduct *Leadership Rounds for Patient Safety* and are utilized to help leadership understand and address issues day-to-day demands faced by frontline staff.

PATIENT PORTAL

CCHHS' new patient portal, MyCookCountyHealth officially launched this past Monday, February 24, 2014. In the first four days, 3,225 emails have been collected of which 225 patients have created profiles and are now able to securely access their medical information.

LEADERSHIP DEVELOPMENT PROGRAM

While the first cohort of the CCHHS University's Leadership Development Program graduated on December 17, 2013 the group continues to participate in Lunch & Learn sessions. On February 11th Dr. Goodman, CEO of Rush University Medical Center and several members of his leadership team (COO, CNO and Head of ED) presented on lessons they learned implementing programs related to improving the patient experience.

Preparations are underway for the second cohort; the next session is scheduled to begin April 1, 2014 and conclude June 17, 2014. Applications are currently available on-line. The application process closes Monday, March 3, 2014.

New to the upcoming session – several members from the first cohort will serve as Mentors for the second cohort, the curriculum will include a module on Quality and Safety and the addition of a speaker/presenter to discuss "Managing a Diverse Workforce".

Many thanks to the Civic Consulting Alliance and Strategic Talent Solutions - great pro-bono partners in developing the program and facilitating the first cohort. The sustainability of the program now rests with our Human Resources team.

NOTEWORTHY

On Thursday, March 6, 2014 at 9:00pm, CNN will begin airing its new documentary called *Chicagoland*. The Stroger Hospital Trauma Unit will be featured in several episodes.

RECOGNITION

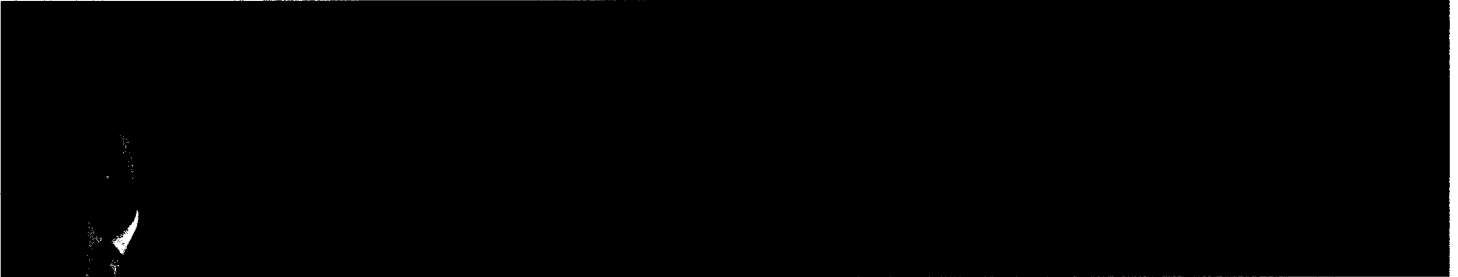
Dr. Courtney Hollowell, Chairman, CCHHS Department of Urology

One of the riches of our health and hospital system is the dedication of our physicians and employees to our patients and communities.

Today I want to recognize Dr. Courtney Hollowell, our chairman of urology... I am not asking you today to direct your attention to his leadership of our excellent programs in surgery, patient care, teaching and research... Rather, today, I want us to applaud his voluntary leadership role in community health. Dr. Hollowell was named one of Black Entertainment Television's 28 Men of Change during African American History Month and joins an impressive list of men including Forrest Whitaker, Steve Harvey and Quincy Jones.



Both inside and beyond the operating room, this humble surgeon goes the distance to improve men's health in our community.



"To whom much is given even more is expected" are the early memories of the encouraging words my father would say sitting on the edge of my bed while I fell asleep at night. No dream was too big as I saw myself as a future astronaut, nuclear physicist, engineer or even surgeon. We were taught that dreaming wasn't the problem, but to have never tried was. Growing up in Detroit, the sixth of seven children, my mother watched over us like a hawk. She gave us a good example of a loving, caring environment from which anything was possible. My father is a well-respected physician who broke racial barriers in medicine decades ago. I grew up watching his example, as he treated Detroit's underserved patients and mentored others rising in his wake. It was through his example that I became the man I am today.

It was my father who taught me that philanthropy is not just about giving money—it's about giving of one's self. It's about lifting up and reaching out.

When I decided to become a surgeon, it was not only because I wanted to make a difference. I became a surgeon because I loved science and the challenge of life-long learning. But soon I realized that with the gift of healing hands came a great responsibility to make the world better, one person, one family, one community at a time.

Recently, a mother and her son came to me at Chicago's Cook County Hospital where I'm the Chief of Urology. She'd been told by several doctors that her son, who ignored his symptoms for some time, had inoperable cancer. But she refused to give up on him. Desperate for a second opinion, she asked me to review his case, and in the end, I decided to operate. When I was able to look her in the eye and say, "We were able to get it all," I was reminded of the power to change lives through the blessing of science.

It is unacceptable that many men wait until something is seriously wrong before going to the doctor. Recognizing that health begins long before anyone steps into a doctor's office, I developed the Men's Health Initiative to promote wellness, prevention and the understanding of common health conditions. Through innovative community health programming, men learn the importance of health care instead of sick care. With the help of strong community partnerships, I see a day where men aren't being dragged into doctor's offices by their loved ones. Instead, they are taking pro-active control of their well-being, and serving as an example for their partners, children and communities.

In addition to our Men's Health Initiative, I am most proud of what we have been able to do to affect the future of medicine. With our Tomorrow's Doctors program we are working to expose our youth to the possibilities of medicine as a career. I am hoping that we can inspire the magic of medicine in the minds of underrepresented children. With the right encouragement and exposure, the door of possibilities can be opened, making today's children "tomorrow's doctors."

On the frontlines of fighting cancer, Dr. Courtney Hollowell is a physician and the Chairman of Urology for the Cook County Health and Hospitals System. Dr. Hollowell has published numerous articles in peer-reviewed journals and is nationally recognized as an expert in urologic oncology (Prostate, Kidney, Bladder, Penile, and Testicular Cancer), genitourinary trauma/reconstructive surgery and men's health issues.

As posted: <http://www.bet.com/news/features/bet-and-icon-mann-present-28-men-of-change.html>